

## DRAFT

### State Quality Improvement Council (SQIC)

January 31, 2006

#### SQIC Mission Statement:

To assure a collaborative, accessible, responsive, efficient and effective mental health system that is culturally competent, client and family oriented, and age appropriate by the implementation of quality improvement strategies.

#### SQIC Update

The SQIC has not met since May, 2005. Many exciting changes in California's public mental health system are currently being introduced as a result of the passage of Proposition 63 in November 2004, now known as the Mental Health Services Act (MHSA).

The SQIC is being reintroduced with new methods and a new focus in order to meet the challenges of the transformative process being instituted in state and local public mental health systems per the MHSA. The new format will build on the previous work of the SQIC, and serves as an example of the quality improvement process.

#### Suggested Innovative Quality Improvement Methodologies

The State Quality Improvement Council) will design, implement, evaluate and support processes and interventions that maintain and improve quality. The council's focus will be on quality improvement and quality promotion. The council, comprised of state, county, local representatives and other stakeholders, will review data, processes and other information, and will recommend interventions to bring about quality change.

The council will collaborate with existing quality-related committees and councils (such as the Compliance Advisory Committee, the External Quality Review Organization, the Performance Measurement Advisory Committee, the California Mental Health Planning Council, and the County Mental Health Directors Association) and will review data gathered by MediCal claims, the Client and Services Information System, Statewide Performance Outcome Measurement System, etc. to identify successes and problems related to quality processes. The SQIC will act as a feedback mechanism to suggest process improvements and interventions that will generate added and/or improved quality across mental health systems.

Building on previous work, the SQIC will use the recommendations of the Institute of Medicine's Crossing the Quality Chasm workgroup, and additionally incorporate the transformative philosophy embodied in the Mental Health Services Act (MHSA). The

MHSA philosophy especially reflects the importance of processes that are client and family driven and that are individualized to provide “whatever it takes” activities in support of recovery.

An important goal of the SQIC will be to provide education about the interpretation and contextualization of data and other information. As a result, participants and other interested parties will improve their understanding of data. Through increased understanding of data, speculation about what data means will be reduced, decision support will be improved, and the design of subsequent quality improvement processes will be enhanced.

### Suggested Initial Focus of the Redesigned SQIC

As suggested above, the redesigned SQIC should collaborate with existing performance information entities to identify areas of quality improvement of interest to federal, state and local systems.

For instance, State DMH MediCal Oversight is responsible for ensuring that local public mental health programs and their contract providers are in compliance with State and Federal laws and regulations pertaining to participation in MediCal programs.

Therefore, it is suggested that the SQIC:

1. Increase interface with MediCal Oversight Compliance Advisory Committee
2. Explore potential methods for automating compliance review tools so that information gathered from compliance reviews can be quantified and utilized to identify areas of quality improvement

Another source of existing quality improvement related data comes through the External Quality Review Organization. In that process, a contracted independent organization reviews Mental Health Plans (MHP's) that provide specialty mental health services to MediCal eligible clients. It is therefore suggested that the SQIC also:

1. Increase interface with the contracted External Quality Review Organization, (currently APS Healthcare).
2. Collaborate with APS Healthcare to assist counties in standardizing and/or Supporting Performance Improvement Project design, implementation and data utilization required by the Federal Medicaid Waivers.

### MHSA Vision and Goals

With the passage of the Mental Health Services Act in 2004, and the philosophy underlying the Act, opportunities exist for the SQIC to interface with the Performance Measurement Advisory Committee, State DMH, local county mental health

departments, California Mental Health Planning Council, and California Mental Health Directors Association, etc. to identify and design specialized studies that reflect the following transformational strategies:

- Recovery
- Stigma Reduction
- Provider education about recovery oriented services
- Use of consumer providers and peer counselors
- Integration/coordination of mental and physical healthcare
- Interface between Community Services and Supports and primary care, social services, education, etc.
- Determination of information needed to be included in an electronic data record
- Evidence Based Practices/fidelity and outcomes
- Data quality
- Family engagement
- Prevention
- Improving access to services by communities, cultures and special populations